PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10702421

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			/		COIL	11111 2)	ŗ	RATE	FEE	1 1	RATE	FEE	
ļ			<i>6</i>		NO 1340	CO EVEDA	-	BASIC FEE			BASIC FEE	770.00	
FOR			NUMBER FILED			ER EXTRA	F	77310 1 22	383.00	OR	DASIO I EE	770.00	
TOTAL CHARGEABLE CLAIMS			<i>b</i> minus 20= *		*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS								X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	_	TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II								OTHER THAN					
					nn 2)	(Column 3)	-	SMALL		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESE	PENDENT CLAIM				+145=		OR	+290=				
	, h	•				. ;	<u> </u>	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	·	
		(Column 3)	AL	DDH. FEE (יי							
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colun HIGHI NUME PREVIO PAID F	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	, and .	X43=		OR	X86=		
<	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				CLAIM								
					ï	•		+145=	1	OR	+290=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=		
	f the entry in color	mn 1 is loss than th	e entry in col	mn 2 umito	"O" in col	umn 3				011			
**	If the "Highest Nu	mn 1 is less than th mber Previously Pa mber Previously Pa	id For IN THIS	S SPACE is	less than	20, enter "20."	<u>_</u>	TOTAL DIT. FEE		l	TOTAL ADDIT. FEE		